Non-Medical Home and Community Based Services

Federal, State and Local Funding

The Non-Medical Home and Community Based Services (NMHCBS) System offers an array of services designed to assist older and/or disabled Arizonans to live as independently as possible in their homes or communities. Federal, state and local funding are combined to support the NMHCBS System. The funding sources include the following:

- Older Americans Act (OAA) Title III & Title VII;
- Social Services Block Grant (SSBG);
- Other Federal
- State Appropriated Funds;
- Arizona Long Term Care System (ALTCS); and
- Locally generated sources including participant contributions, city funds, County United Way funds, and local foundation funds.

NMHCBS Focus, Eligibility and Services

There are three major focuses of the NMHCBS System. First, the system provides an array of services to prevent inappropriate or premature institutionalization. Second, the system allows an individual to live independently in his/her home or community setting as long as possible. Third, the system strengthens the informal supports created by families and caregivers of older Arizonans and Arizonans with disabilities.

NMHCBS System eligibility is determined by an assessment of functional ability to determine if the individual is moderately to severely impaired in two or more areas of Instrumental Activities of Daily Living or Activities of Daily Living. The Area Agencies on Aging (AAAs) provide entry into the NMHCBS System as well as the NMHCBS services. Serving individuals who are the most frail and most at-risk of institutionalization is a top priority, in accordance with the OAA. The NMHCBS System provides thorough, comprehensive case management to coordinate services. The services offered by the NMHCBS System include the following:

- Adult Day Health Care (ADC)
- Case Management (CMG)
- Home Delivered Meals (HDM)
- Home Health Aid (HHA)

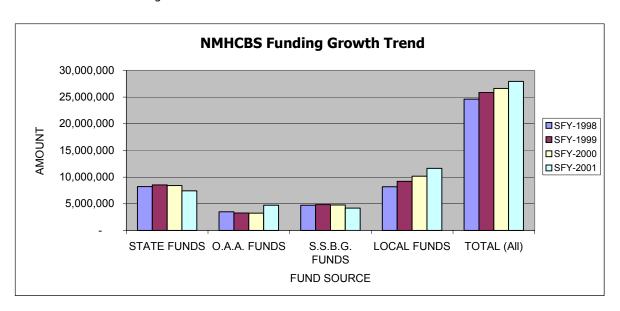
- Housekeeping (HSK)
- Personal Care (PRC)
- Respite Care (RSP)
- Home Nursing (VNS)

Funding and Growth Trends

Table 2 – NMHCBS SFY 1998 through SFY 2001 Funding

	STATE FUNDS	O.A.A. FUNDS	S.S.B.G. FUNDS	LOCAL FUNDS	TOTAL (AII)
SFY-1998	8,203,987	3,481,669	4,736,840	8,187,425	24,609,921
SFY-1999	8,535,297	3,271,556	4,838,342	9,209,249	25,854,444
SFY-2000	8,427,138	3,238,492	4,777,266	10,180,789	26,623,685
SFY-2001	7,418,317	4,716,138	4,179,847	11,644,354	27,958,656

Chart 5 - NMHCBS Funding Growth Trend



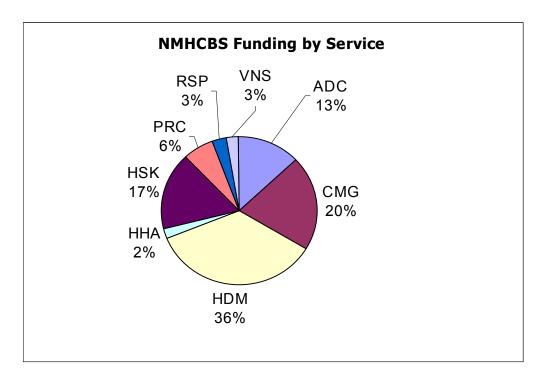
- The largest increase was in local funds with a 42% increase between SFY 1998 and SFY 2001. A large part of the increase was due to providers receiving increased ALTCS funding to provide services to ALTCS participants.
- The OAA Funding had a 26% increase between SFY 1998 and SFY 2001 due to the addition of the new Title III-E Family Caregiver Support Program.

SFY 2001 Funding Sources and Services

Table 3 - SFY 2001 NMHCBS Funding

	ADC	CMG	HDM	HHA	HSK	PRC	RSP	VNS	TOTAL
State	0	1,543,505	0	436,096	3,021,139	1,440,967	456,444	520,166	7,418,317
OAA	529,257	716,608	2,652,234	16,571	365,134	171,440	245,390	19,502	4,716,138
SSBG	422,325	1,410,304	1,165,044	172,359	709,194	132,679	77,401	90,540	4,179,847
Local/Other	2,781,018	1,977,403	5,960,576	35,878	680,480	38,825	91,095	79,080	11,644,354
TOTAL	3,732,600	5,647,820	9,777,855	660,903	4,775,947	1,783,912	870,331	709,289	27,958,657

Chart 6 - SFY 2001 NMHCBS Funding by Service



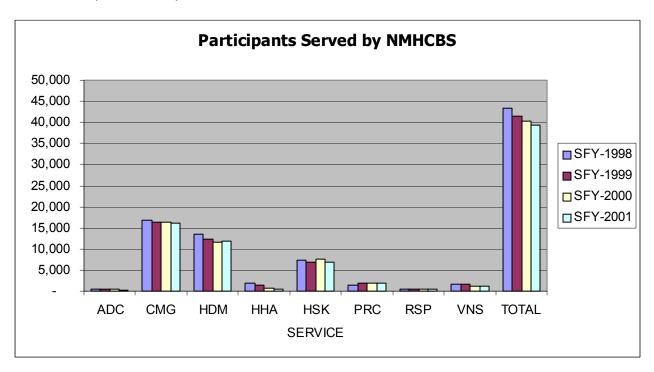
- Home Delivered Meals expenditures represent the highest cost at 36% of the total due to the rising cost of providing the service and the volume of service provided.
- Case Management expenditures represent the next highest cost at 20% of the total due to the volume of service provided.

Participant Growth Trends

Table 4 - Participants from SFY 1998 to SFY 2001

	ADC	CMG	HDM	HHA	HSK	PRC	RSP	VNS	TOTAL
SFY-1998	372	16,714	13,506	1,932	7,402	1,502	380	1,669	43,477
SFY-1999	401	16,447	12,407	1,486	6,786	1,801	535	1,541	41,404
SFY-2000	386	16,238	11,722	711	7,482	1,934	516	1,250	40,239
SFY-2001	346	16,106	11,820	583	6,942	1,957	505	1,132	39,391

Chart 7 - Participants Served by NMHCBS from SFY 1998 to SFY 2001



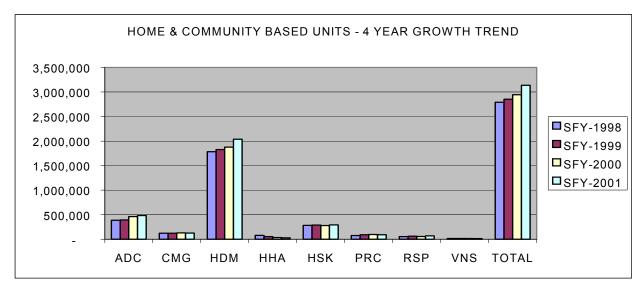
- Home Health Aid services experienced a 70% decline due to participants transferring to Personal Care service
- Home Nursing also experienced a decline, with 32% fewer participants requiring this service over the four-year period, due to the expense involved in hiring a RN, and/or contracting with a licensed home health agency.
- Due to the additional state funds appropriated for Respite Care, this service increased by 33% over the four-year period.

Unit Growth Trends

Table 5 - Units from SFY 1998 to SFY 2001

	ADC	CMG	HDM	ННА	HSK	PRC	RSP	VNS	TOTAL
SFY-1998	385,714	121,570	1,781,500	77,316	281,795	75,376	51,794	16,559	2,791,624
SFY-1999	392,687	122,614	1,826,608	52,070	289,218	92,103	62,448	14,967	2,852,715
SFY-2000	460,708	127,846	1,876,020	33,425	279,007	96,419	55,734	15,649	2,944,808
SFY-2001	484,652	125,742	2,036,993	27,266	290,480	90,117	68,780	13,070	3,137,100

Chart 8 - NMHCBS Units - Four-year Growth Trend



- Overall, there was a 12% increase in the total units provided between SFY 1998 and SFY 2001.
- Home Delivered Meals increased by 14% between SFY 1998 and SFY 2001.
- Adult Day Health Care reflects a 25% increase in service units; however, the increase is due to an increased number of ALTCS participants receiving services through NMHCBS System providers.

Demographics for NMHCBS Participants for SFY 1999 to SFY 2001

- White, Non-Hispanics represent the largest number of participants averaging 72% of the total participants during the three-year period.
- Hispanics maintained approximately a 16% participation rate in the NMHCBS System over the three-year period.
- African-Americans represent approximately 5% of the NMHCBS System participants for the three years.
- Asian-Americans represent the smallest group of participants with a less than 1% participation rate for the three years.
- Persons 75 to 85 represents the largest number of participants averaging 31% of the total participants during the three-year period.
- Persons 85 and older represent the next largest and fastest growing group in the NMHCBS System.

Additional NMHCBS Services and Waiting List

Other Home and Community Based services are also available within the NMHCBS System to individuals who are 60 years of age or older and/or disabled individuals under 60. These services include the following:

- Congregate Meals in Senior Centers
- Outreach
- Transportation
- Home Repair
- Recreation/Socialization
- Nutrition Assistance
- Information and Referral
- Alzheimer's CARE Program
- Legal Services
- Long-Term Care Ombudsman (under 65 years old)
- State Health Insurance Program (under 65 years old)

The waiting list for SFY-2001 NMHCBS was a total of 651 participants, with the highest number waiting for Housekeeping (308) and Personal Care PRC (107). Individuals declining NMHCBS generally chose to seek assistance outside of the NMHCBS System.